2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# N04909

Entity Name: MANAGERIAL ASSOCIATION OF EMERGENCY SERVICES, INC.

Current Principal Place of Business:

4980 CITY CENTER BLVD
NORTH PORT, FL 34286 US

New Principal Place of Business:

Current Mailing Address:

4980 CITY CENTER BLVD
NORTH PORT, FL 34286 US

New Mailing Address:

FEI Number: 59-2377594 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUADERER, DAVID R
4980 CITY CENTER BLVD
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DST	( ) Delete
Name:	QUADERER, DAVID R	
Address:	4980 CITY CENTER BLVD	
City-St-Zip:	NORTH PORT, FL 34286	
Title:	PD	( ) Delete
Name:	BONAKOSKE, MIKE	
Address:	4980 CITY CENTER BLVD	
City-St-Zip:	NORTH PORT, FL 34286	
Title:	VD	( ) Delete
Name:	SOUSA, THOMAS	
Address:	4980 CITY CENTER BLVD	
City-St-Zip:	NORTH PORT, FL 34286	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. QUADERER DST 01/14/2008

Electronic Signature of Signing Officer or Director — Date